





Iraq: **EWARN** & Disease Surveillance Bulletin

2017 Epidemiological Week: 37

Reporting Period: 11 – 17 September, 2017

HIGHLIGHTS

- Number of reporting sites: (209) reporting sites submitted timely and completely weekly reports through EWARN: (94) in Internally Displaced People's (IDP) camps, (7) in refugee camps, (100) in mobile clinics and (8) in hospitals.
- ◆ Total number of reporting sites increased by 18% from Week 36= 179 to Week 37= 209.
- ◆ The cumulative consultations from Week 01-37 is 3,524,816. (Figure I)
- ◆ Total number of consultations in Week 37: 131,340 (Male=80,117 and Female=51,223) (Figure II) consultations were reported during this week marking an increase of 18% when compared to last week, (Week 36=108,025).

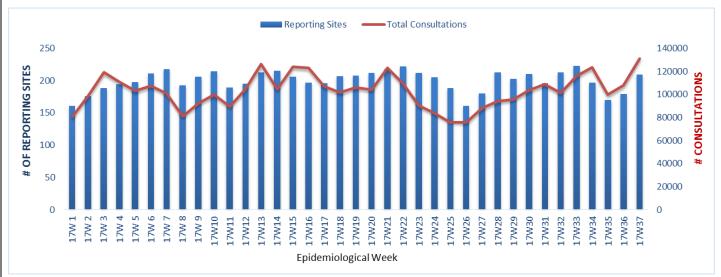


Figure I: Total number of consultations compared to number of reporting sites by week in Iraq, 2017 (Week 01 -37)

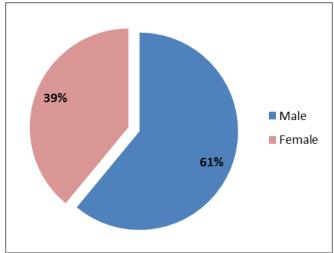


Figure II: Percentage of consultations by gender in Iraq, Week 37, 2017

- ◆ Leading causes of morbidity: Acute Respiratory Tract Infections (n=36,381 (28%)), Acute Diarrhea (n=6,427 (6%)) and skin diseases including Scabies (n=1,477 (1%)) remained the leading causes of morbidity in all camps and displaced population areas. (Figure III).
- Number of Alerts: 1 Alert (4 suspected measles cases) was received through EWARN.

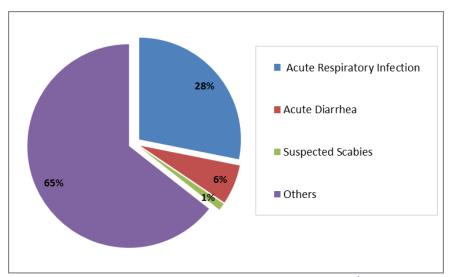


Figure III: Distribution of EWARN cumulative consultations by the common reported disease/events in Iraq, Week 37, 2017

Table I: Proportion of common reported disease/events in Iraq by Governorate in Week 37, 2017

Governorate	Total Consultations	Reporting Sites	Acute Diarrhea	Acute Respiratory Infection	Suspected Scabies	Others
Anbar	16813	17	4%	23%	1%	71%
Baghdad	1517	11	1%	26%	2%	71%
Dahuk	6949	20	4%	37%	1%	58%
Diyala	37	1	0%	16%	0%	84%
Erbil	4625	16	4%	32%	4%	56%
Kerbala	743	1	2%	34%	3%	60%
Kirkuk	3377	12	6%	28%	2%	64%
Najaf	332	2	3%	30%	14%	52%
Ninewa	80677	81	8%	29%	1%	61%
Salah al-Din	6094	14	7%	24%	2%	65%
Sulaymaniyah	10176	34	1%	21%	1%	76%

^{*}The proportion of the disease/event from the total consultation of the governorate

Morbidity Patterns

IDP camps

The proportion of Acute Respiratory Tract Infections (ARI) increased since last week (ARI: Week 36=22% and Week 37=27;) whereas Acute Diarrhea (AD) and skin infestations including Scabies decreased (AD: Week 36=7% and Week 37=6%; and Scabies: Week 36=1.2% and 37=1%). (Figure IV).

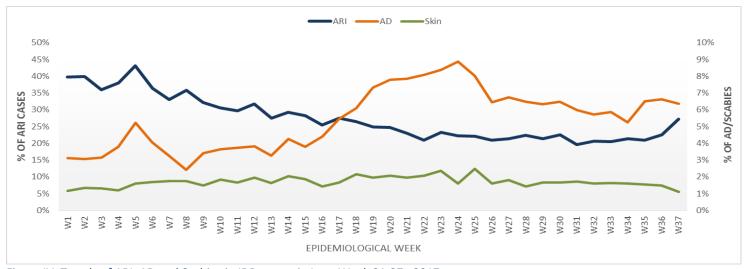


Figure IV: Trends of ARI, AD and Scabies in IDP camps in Iraq, Week 01-37, 2017

Refugee camps

The proportions of Acute Respiratory Tract Infections (ARI) and skin infestations including Scabies increased since last week (ARI: Week 36=38% and Week 37=41%; Scabies: Week 36=3% and Week 37=4%); whereas Acute Diarrhea (AD) slightly decreased from 4% in Week 36 to 3% in Week 37. (Figure V)

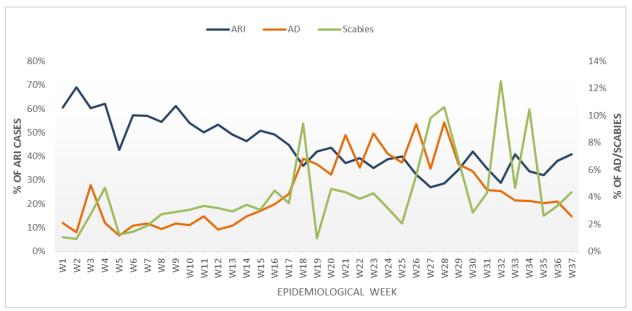


Figure V: Trends ARI, AD and Scabies in Refugee camps in Iraq, Week 01 -37, 2017

Distribution of the common diseases by proportion and location for IDP camps in Iraq

Figures VI and VII indicates the proportions and distribution of Acute Respiratory Tract Infection (ARI), Acute Diarrhea (AD) and skin infestations including Scabies, which comprises the highest leading causes of morbidity, reported through Static Health Facilities and Medical Mobile Clinics (MMCs) in IDP camps in Iraq, excluding Ninewa in Week 37.

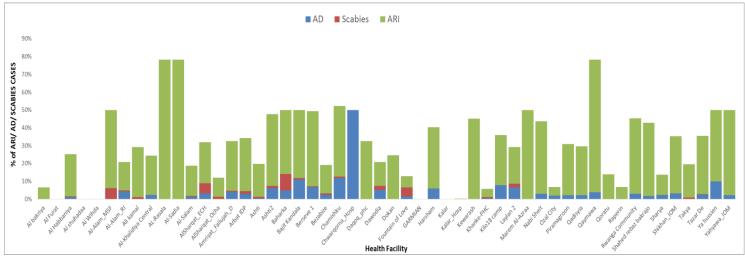


Figure VI: Proportion and distribution of ARI, AD and Scabies cases reported through Static Health Facilities in IDP camps in Iraq, excluding Ninewa

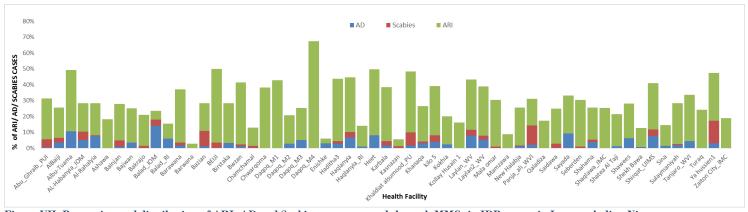


Figure VII: Proportion and distribution of ARI, AD and Scabies cases reported through MMCs in IDP camps in Iraq, excluding Ninewa

Distribution of the common diseases by proportion and location for IDP camps in Ninewa Governorate

Figure VIII and IX indicate the proportions and distribution of Acute Respiratory Tract Infection (ARI), Acute Diarrhea (AD) and skin infestations including Scabies, which comprises the highest leading causes of morbidity, reported through Static Health Facilities and Medical Mobile Clinics (MMCs) in IDP camps in Ninewa Governorate in Week 37.

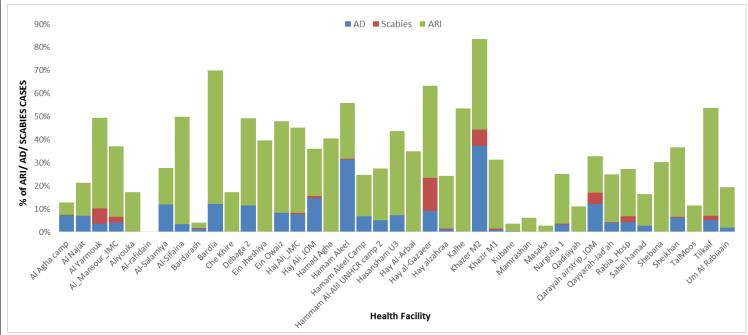


Figure VIII: Proportion and distribution of ARI, AD and Scabies cases reported through Static Health Facilities in IDP camps in Ninewa Governorate

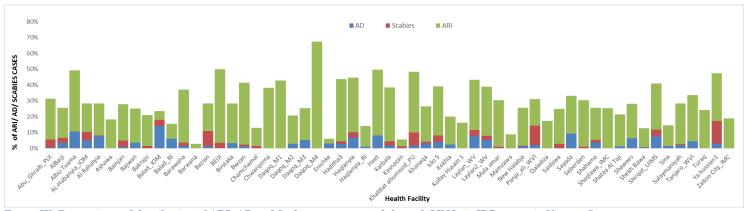


Figure IX: Proportion and distribution of ARI, AD and Scabies cases reported through MMCs in IDP camps in Ninewa Governorate

Distribution of the common diseases by proportion and location for IDP camps in Iraq

Figure X indicates the proportions and distribution of Acute Respiratory Tract Infection (ARI), Acute Diarrhea (AD) and skin infestations including Scabies, which comprises the highest leading causes of morbidity, reported in Refugee camps in Iraq in Week 37.

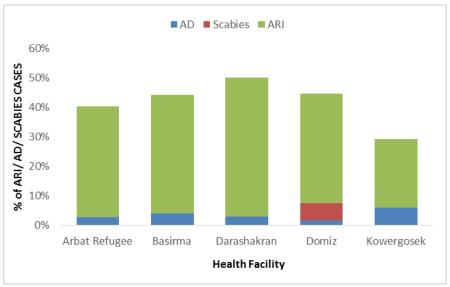


Figure X: Proportion and distribution of ARI, AD and Scabies cases reported in Refugee camps in Iraq, Week 37, 2017

Trends of Acute Diarrhea

Figure XI indicates the trends of Acute Diarrhea reported from Week 01 to Week 34 through the EWARN system. The proportion of Acute Diarrhea (AD) cases slightly decreased from 7% in Week 36 to 6% in Week 37 although there was increase in the reporting sites.

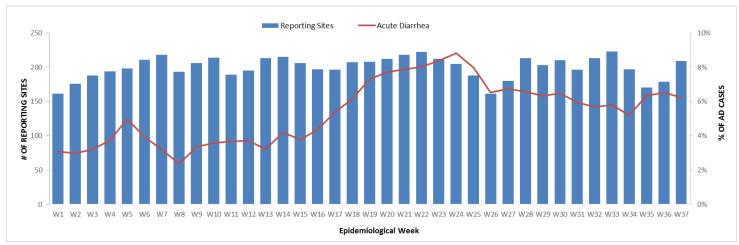


Figure XI: Proportion of AD cases reported compared to number of reporting sites by week in Iraq, Week 01 -37, 2017

Trends of Bloody Diarrhea (BD) and Acute Jaundice Syndrome (AJS) in IDP camps

Figure XII indicates the number of cases of Bloody Diarrhea (BD) and Acute Jaundice Syndrome (AJS) reported in IDP camps by week, Week 01-37.

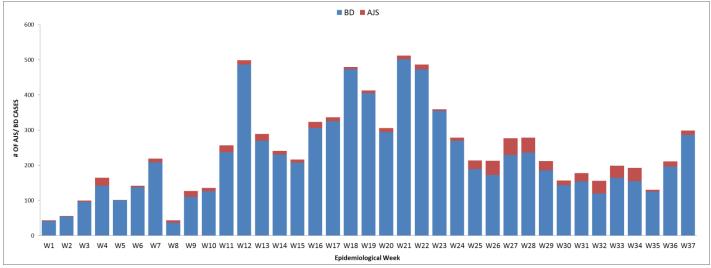


Figure XII: Number of waterborne diseases (BD and AJS) reported in IDP camps by week, Week 01-37, 2017

Trends of waterborne diseases in Refugee camps

Figure XIII indicates the number of waterborne diseases (Bloody Diarrhea (BD) and Acute Jaundice Syndrome (AJS)) reported in refugee camps by week, Week 01-37.

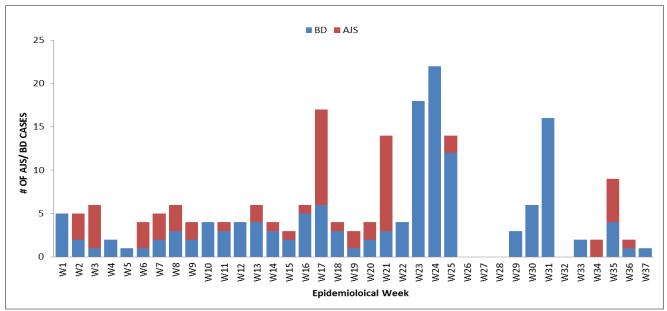


Figure XIII: Number of waterborne diseases reported in Refugee camps by week, Week 01-37, 2017

Alerts and Outbreaks

One (1) alert was generated during epidemiological Week 37 in Ninewa governorate. The alert was investigated by Departments of Health, WHO and health partners in the field and responded to within 72 hours; The 4 suspected measles cases were verified as True. (Figure XIV)

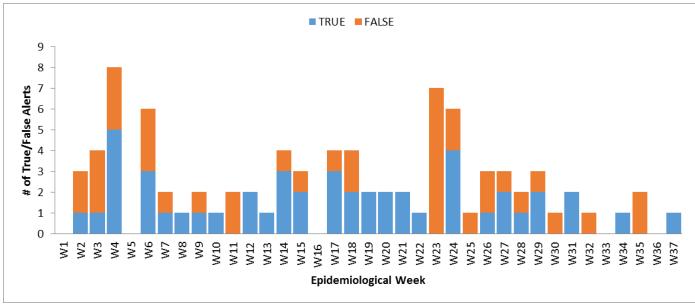


Figure XIV: Number of True/False Alerts received through EWARN per week, Week 01-37, 2017

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EWARN Dashboard link: http://irq-data.emro.who.int/ewarn/
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EWARN reporting health facilities: http://irq-data.emro.who.int/ewarn/reporting_sites

EWARN bulletins: http://emro.who.int/irg/ewarns/index.html